CITY OF HALLANDALE BEACH 400 S. FEDERAL HWY, HALLANDALE BEACH, FL 33009 PH: (954) 457-1383 FAX: (954) 457-1488

PERMIT NUMBER_	
PLUMBING PERMI	T APPLICATION

		BUILDING PERMIT NO. (if any)			
1)					
OWNER'S NAME .	PHONE NO.	I HEREBY MAKE APPLICATION FOR A PERMIT TO: Erect Alter			
		Demolish Add Repair Remove Remodel			
MAIL ADDRESS		NUMBER OF PERSONS PER S.F.B.C. 4603.22			
CITY STAT	TC :	THE FOLLOWING TYPE STRUCTURE: Res Comm Ind			
SIA	C	Application is hereby made to obtain a permit to do the work and installation as hereon indicated. I certify that no work or installation has been effected prior to			
2)		the issuance of the permit and that all work will be performed to meet the			
CONTRACTOR CO. NAME	PHONE NO.	standards of all laws regulating construction in the City of Hallandale Beach.			
		ALL WORK MUST COMPLY WITH THE FLORIDA BUILDING			
STREET ADDRESS		CODE 2001.			
CITY STAT	TE Z	ZIP			
STATE#		PRINT NAME OF QUALIFIER			
CC #					
30 "		SIGNATURE OF QUALIFIER DATE			
3)		STATE OF FLORIDA			
ARCHITECT	PHONE NO.	COUNTY OF BROWARD			
4) ENGINEER		The foregoing instrument was acknowledged before me this			
	PHONE NO.	day of, 20, by			
5) LOT BLOCK SUBDIVISION	(I I I ' (')	(name of person acknowledging). NOTARY STAMP HERE			
TO I BLOCK SUBDIVISION	(legal description)				
FOLIO NO. (required)		\dashv			
7)					
STREET ADDRESS-JOB SITE		NOTARY			
3)		(Signature of Notary Public - State of Florida)			
PRESENT USE		Personally Known OR Produced Identification			
SHADED AREA FOR OFFICE L	ISE ONLY	Type of Identification Produced Driver's License			
CONDITIONS UNDER WHICH A	APPROVED:				
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		SIGNATURE DATE APP TIME			
	:::PLÜMBING::::				
	FIRE ENGINEERING				
APPLICATION APPROVAL	SANITATION				
		signed by an authorized representative of the City of Hallandale			
Beach Building Dept. and all fees	s paid and receipt ac	knowledged in the space provided on the permit.			
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ALL PLANS MUST INCLUDE FOLIO NUMBER

BY:	AND PROPERTY ADDRESS. AMENDED PLANS MUST ALSO INCLUDE THE					
CHIEF PLUMBING INSPECTOR	DATE: PERMIT NUMBER					
APPLICATION ONLY. PERM	APPLICATION ONLY. PERMIT TO BE ISSUED SEPARATELY					
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CITY OF HALLANDALE BEACH	PLUMBING PERMIT APPLICATION					
SHADED AREAS FOR OFFICE USE ONLY APPLICATION TYPE X PLBG PLUMBING PENALTY FEE, UNPERMITTED WORK	PERMIT TYPE. BDPC PLUMBING & GAS PERMIT, COMMERCIAL BDPR PLUMBING & GAS PERMIT, RESIDENTIAL					
ESTIMATED CONSTRUCTION COST \$	CIMIMMINO DOOL DIDING INSTALLATION/ODAIO					
ROUGH/PLUGGED OUTLETS	SWIMMING POOL PIPING INSTALLATION/SPA'S					
Area Drains, No. of	Piping, No. of Ft.					
Bathtubs, No. of	Pool Heater					
Bidet, No. of	Repair Replace					
Can Wash/Dumpster Drain, No. of	ResidentialCommercial					
Clothes Washer, No. of	Swimming PoolSpa					
Dishwasher, No. of	LIQUID TANKS, FUEL PUMPS, PIPING					
Disposal, No. of	No. of Gals					
Drinking Fountain, No. of	WELLS					
Floor Drains, No. of	Diameter of					
Lavatories, No. of	No. of					
Shower, No. of	Water Pumps, No. of					
Sink, No. of	Rain Sensor					
Three Compartment Sink, No of	WATERMAINS					
Trap Resealers, No. of	No. of Feet					
Urinals, No. of	WATER DRAINAGE					
Water Closet, No. of	Drain Field, No. of Lin. Ft.					
Water Heater, GasElectric, No. of	Rain Water Roof Drains, No. of					
HOSE BIBBS/VACUUM BREAKERS, NO. OF	Soakage Pit (catch basin), No. of					
OIL & GREASE INTERCEPTORS	STORM/SANITARY UTILITY/COLLECTOR					
No. of Gal	No. of Feet					

Manhole, No. of

GAS SERVICE

__OTHER

Roof Drains, No of

____Rainwater Leaders, No. of _TEMPORARY TOILETS, NO. OF

Gas Piping, No. of Feet

System, Tank Size, No. of Gals Tank/Cylinders Only, No. of

Outlet/Meter, No. of

DEMO AND/OR CAP OFF

REPAIRS/ALTERATIONS TO EXISTING SYSTEM

_____Septic Tank Abandonment, No. of
_____Sewer System for Private Developments
____WATER PIPING
____Lawn Sprinklers, No. of Heads
_____Water Connections or Outlets, No. of
_____Water Service New No. of Lin. Et

Tank Abandonment, No. of.

Building Sewer, No. of

Repair/Replace/New

SEWER

__Water Service, New, No. of Lin. Ft. _Water System for Private Developments

___Water System Repipe/Repair

_FIRE CONTROL SYSTEM

Dry Standpipe, No. of Fire Sprinklers, New, No. of Heads Fire Sprinklers, Replace, No. of Heads Hose Rack, No. of Includes standpipe/siamese connect/pumps Repairs and/or 200 lbs Test Standpipes, No. of SOLAR WATER HEATER Install, No. of Repair, No. of	NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies or federal agencies."

APPLICATION ONLY. PERMIT TO BE ISSUED SEPARATELY.

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